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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | |
|----|--|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Richard First name James Middle name | First name Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Wolff Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you have used in the last 8 years | • | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9359 | | |

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Debtor 1 Richard James Wolff

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ☐ I have not used any business name or EINs. DBA Wolff Strength Corp., d/b/a MedFitness Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 3406 Oxbow Lane | If Debtor 2 lives at a different address: |
| | | Saint Charles, IL 60174 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Kane | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Debtor 1 Richard James Wolff

Case number (if known)

| 7. | The chapter of the Bankruptcy Code you are | | | rief description of each, s go to the top of page 1 a | | | .C. § 342(b) for Individuals Fili | ng for Bankruptcy | |
|-----|---|-------|----------------------------------|--|----------------------------------|---------------------|--|---|--|
| | choosing to file under | ■ Cha | apter 7 | | | | | | |
| | | ☐ Cha | apter 11 | | | | | | |
| | | ☐ Cha | apter 12 | | | | | | |
| | | ☐ Cha | apter 13 | | | | | | |
| 8. | How you will pay the fee | a | bout how yo | u may pay. Typically, if yo attorney is submitting yoo | ou are paying | the fee yourself, | the clerk's office in your local c you may pay with cash, cashie ir attorney may pay with a cred | er's check, or mone | |
| | | | | the fee in installments e in Installments (Official | | e this option, sigr | n and attach the Application for | Individuals to Pay | |
| | | | _ | , | • | this option only i | f you are filing for Chapter 7. B | sy law, a judge mav | |
| | | — b | out is not requal hat applies to | uired to, waive your fee, a by your family size and you | and may do so u are unable to | o only if your inco | ome is less than 150% of the of nstallments). If you choose this Form 103B) and file it with you | ficial poverty line option, you must fi | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | | | |
| | | | District | | When | | Case number | | |
| | | | District | | When | | Case number | | |
| | | | District | | When | | Case number | | |
| 10. | Are any bankruptcy cases pending or being | □No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ Yes | | | | | | | |
| | | | Debtor | George M. Wolff | | | Relationship to you | Father | |
| | | | District | Kane | When | 10/13/15 | Case number, if known | 15-34727 | |
| | | | Debtor | | | | Relationship to you | | |
| | | | District | | When | | Case number, if known | | |
| 11. | Do you rent your | ■ No. | Go to li | ne 12. | | | | | |
| | residence? | ☐ Yes | . Has yo | ur landlord obtained an e | viction judgm | ent against you a | nd do you want to stay in your | residence? | |
| | | | | No. Go to line 12. | | | | | |
| | | | | | | | | | |

| | | Document | Page 4 of 46 | |
|----------|---------------------|----------|--------------|---------------|
| Debtor 1 | Richard James Wolff | | Case number | er (if known) |

| Part | Report About Any Bu | sinesses ` | You Owr | n as a Sole Propriet | or | | |
|------|---|------------------------|---|-------------------------|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | e and location of bus | iness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | oer, Street, City, Stat | te & ZIP Code | | |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: | | |
| | | | | Health Care Busin | less (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | re filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate es. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .S.C. 1116(1)(B). | | | | |
| | For a definition of small | ■ No. | I am | not filing under Chap | oter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am t | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am | filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Pari | 4: Report if You Own or | Have Any | Hazardo | ous Property or Any | y Property That Needs Immediate Attention | | |
| | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs | ■ No. □ Yes. | What is | the hazard? | | | |
| | immediate attention? | | needed, | , why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | Number, Street, City, State & Zip Code | | |
| | | | | | inumber, Street, City, State & ZIP Code | | |

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Richard James Wolff Debtor 1

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military

combat zone. If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any, If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 46 Case number (if known) **Richard James Wolff** Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25.001-50.000 1-49** you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50.000 □ \$500.000.001 - \$1 billion ■ \$1,000,001 - \$10 million estimate your liabilities □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** □ \$10.000.001 - \$50 million to be? **\$100,001 - \$500,000** □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million □ \$500,001 - \$1 million ☐ More than \$50 billion □ \$100,000,001 - \$500 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Richard James Wolff Signature of Debtor 2 **Richard James Wolff** Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

January 12, 2016

MM / DD / YYYY

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Debtor 1 Richard James Wolff Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Carl F. Safanda | Date | January 12, 2016 | |
|--|---------------|------------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Carl F. Safanda | | | |
| Printed name | | | |
| Safanda Law Firm | | | |
| Firm name | | | |
| 111 East Side Drive | | | |
| Geneva, IL 60134-2402 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone (630) 262-1761 | Email address | Plegal@xnet.com | |
| 2440695 | | | |
| Bar number & State | | | |

| | | 17(7(.1)11) | .III FAUE 0 UI 40 | | |
|------------------------|--------------------------|-------------------|------------------------------|--------------------|----|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Richard James W | /olff | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS EASTERN DIVISION | N | |
| Case number (if known) | | | | ☐ Check if this is | an |
| | | | | amended filing | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | | assets of what you own |
|-----|---|------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 250,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | | 3,400.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | | |
| | | \$ | 253,400.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 1,587,214.69 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 18,231.06 |
| | Your total liabilities | \$ | 1,605,445.75 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 5,810.50 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,915.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other s | schedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a persona | al, family, or |
| | | | |

the court with your other schedules.

| | | Document | Page 9 of 46 | |
|----------|---------------------|----------|------------------------|--|
| Debtor 1 | Richard James Wolff | | Case number (if known) | |

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ |
|----|--|----|
| 8. | | \$ |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Tot | al claim |
|--|---------|----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ \$ _ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| C | ase 16-00875 | 5 Doc 1 | | 01/12/1 ument | .6 Entered 01/12/1 | L6 13:41 | 44 De | sc l | Main |
|--------------------------------|--|--------------------------|------------|------------------|--|----------------|----------------|------|---|
| ill in this info | rmation to identify | your case and tl | | | 17(((, 1() ()) 4() | | | | |
| Debtor 1 | Richard Jam | es Wolff | | | | | | | |
| | First Name | | e Name | | Last Name | | | | |
| Debtor 2 Spouse, if filing) | First Name | Middle | e Name | | Last Name | | | | |
| | ankruptcy Court for | the NORTHER | N DIST | RICT OF II | LINOIS EASTERN DIVISION | J | | | |
| Tilled Oldles B | animaptoy Court for | uic. Northier | | 11101 01 11 | ELITOIO ENOTERIT DIVIDIOI | | | | |
| case number | | | | | | | | | Check if this is a amended filing |
| | | | | | | | | | arrierided filling |
| Afficial Ec | orm 106A/B |) | | | | | | | |
| | | - | | | | | | | |
| | le A/B: Pr | | | | | | | | 12/15 |
| | | | | | f an asset fits in more than one one filing together, both are equally | | | | |
| | | | | | additional pages, write your nam | | | | |
| art 1: Describe | e Each Residence. Bu | ilding, Land, or Oth | ner Real I | Estate You (| Own or Have an Interest In | | | | |
| Do you own or | have any logal or equ | uitable interest in ar | w roeido | nco buildin | g, land, or similar property? | | | | |
| _ | , , , | iliable iliterest ili ai | iy reside | nce, bullulli | g, ianu, or similar property: | | | | |
| ☐ No. Go to Pa | art 2. | | | | | | | | |
| Yes. Where | is the property? | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 1 | | | What | is the prope | erty? Check all that apply | | | | |
| | kin Avenue s, if available, or other desc | orintion | | Single-fam | ily home | | | | r exemptions. Put the schedule D: |
| Street address | s, ii avaliable, or other desi | cription | | · | multi-unit building | | | | cured by Property. |
| | | | | Condomini | um or cooperative | | | | |
| | | | | Manufactu | red or mobile home | Current va | lue of the | Cu | rrent value of the |
| Elgin | IL | 60123-0000 | | Land | | entire prop | erty? | po | rtion you own? |
| City | State | ZIP Code | | Investment | t property | \$1,0 | 0.000,000 0 | | \$250,000.0 |
| , | | 5.22 | | Timeshare | | | | - | |
| | | | | Other | commercial real estate | | | | wnership interest by the entireties, o |
| | | | Who | has an inter | est in the property? Check one | a life estate | e), if known. | • | , |
| | | | | Debtor 1 o | • | fsa | | | |
| Kane | | | | | • | | | | |
| County | | | | | nd Debtor 2 only | ☐ Check | if this is com | muni | ty property |
| | | | | | e of the debtors and another | , | structions) | | |
| | | | | | n you wish to add about this iter ation number: | n, such as loc | al | | |
| | | | | • | nity Bank is a lender to \ | Nolff Holdi | nas. I I C | The | loans are |
| | | | | | first mortgage on this p | | | | |
| | | | loan | s: First N | lote & mortgage, Second | l Note & m | ortgage. D | | |
| | | | of W | olf Holdi | ngs, LLC. Wolf Holdings | owns this | property. | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$250,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| | | Case 16-00875 | Doc 1 | Filed 01/12/16 | Entered 01/12/16 13:4 | 1:44 | Desc Main |
|----|----------------------|--|-----------------|--------------------------|---|-------------|--|
| D | ebtor 1 | Richard James Wolff | | Document | Page 11 of 46 Case number | (if known) | |
| 3. | Cars, va | ns, trucks, tractors, sport | t utility vehic | cles, motorcycles | | | |
| | ■ No □ Yes | | | | | | |
| | | | | | cles, other vehicles, and accessonowmobiles, motorcycle accessories | | |
| | ■ No □ Yes | | | | | | |
| 5 | | | | | om Part 2, including any entries f | | \$0.00 |
| | | scribe Your Personal and Ho | | | | | |
| | | n or have any legal or eq | | est in any of the follow | ing items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | Example No | old goods and furnishing es: Major appliances, furnite Describe | | hina, kitchenware | | | |
| | ■ Yes. | | | | | 1 | |
| | | Bed an | d a desk | | | | \$100.00 |
| 7. | ■ No | | | | oment; computers, printers, scanner | s; music c | ollections; electronic devices |
| 8. | Collectik Example | oles of value | | | oks, pictures, or other art objects; st | amp, coin, | or baseball card collections; |
| | ■ No □ Yes. | Describe | | | | | |
| 9. | | ent for sports and hobbie es: Sports, photographic, ex musical instruments | | other hobby equipment; | bicycles, pool tables, golf clubs, skis | s; canoes a | and kayaks; carpentry tools; |
| | ☐ Yes. | Describe | | | | | |
| 10 | ■ No | ns les: Pistols, rifles, shotguns Describe | s, ammunitio | n, and related equipmen | t | | |
| 11 | . Clothes Examp | s les: Everyday clothes, furs | , leather coat | s, designer wear, shoes | , accessories | | |
| | Yes. | Describe | | | | | |
| | | Clothin | g for 1 adu | lt | | | \$200.00 |
| 12 | □ No | | ume jewelry, | engagement rings, wed | ding rings, heirloom jewelry, watche | s, gems, g | old, silver |

Official Form 106A/B

Schedule A/B: Property

Case 16-00875 Doc 1 Filed 01/12/16 Entered 01/12/16 13:41:44 Desc Main Document Page 12 of 46 Case number (if known) **Richard James Wolff** Debtor 1 \$200.00 Wedding ring 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ No ■ Yes. Give specific information..... \$100.00 10 year old bicycle 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$600.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$800.00 Checking Chase Bank 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: Wolff Holdings, LLC 25 % \$0.00

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Wolff Strength Corporation, d/b/a MedFitness

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

■ No

☐ Yes. Give specific information about them

Issuer name:

100

%

\$2,000.00

Case 16-00875 Doc 1 Filed 01/12/16 Entered 01/12/16 13:41:44 Desc Main Document Page 13 of 46 Case number (if known) Debtor 1 **Richard James Wolff** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2016 tax refund - return has not been filed Unknown yet **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Case 16-00875 Doc 1 Filed 01/12/16 Entered 01/12/16 13:41:44 Desc Main Document Page 14 of 46 Case number (if known) Debtor 1 **Richard James Wolff** Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,800.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ☐ No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No ■ Yes. Describe..... Customers pay monthly membership fees \$0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ No Yes. Describe.... Used computer, printer, copier \$0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade □ No Yes. Describe.... \$0.00 Strength fitness equipment

41. Inventory

■ No

| Debtor 1 Richard James Wolff | age 15 of 46 Case number (if known) | Desc Main |
|---|---|-----------|
| □ Vac Pasariha | | |
| ☐ Yes. Describe | | |
| 42. Interests in partnerships or joint ventures ☐ No | | |
| ■ Yes. Give specific information about them Name of entity: | % of ownership: | |
| Wolf Holdings, LLC | % | \$0.00 |
| 43. Customer lists, mailing lists, or other compilations ☐ No. | | |
| ■ Do your lists include personally identifiable information (as defined in 11 U.S.C. § | 101(41A))? | |
| □ No | | |
| ■ Yes. Describe | | |
| Location: 3406 Oxbow Lane, Saint Ch | arles IL 60174 | \$0.00 |
| Yes. Give specific information | | |
| 25% interest in Wolff Holdings, LLC | | \$0.00 |
| 25% interest in Wolff Holdings, LLC 45. Add the dollar value of all of your entries from Part 5, including any e for Part 5. Write that number here | | \$0.00 |
| 45. Add the dollar value of all of your entries from Part 5, including any e | | |
| 45. Add the dollar value of all of your entries from Part 5, including any e for Part 5. Write that number here | ave an Interest In. | |
| 45. Add the dollar value of all of your entries from Part 5, including any e for Part 5. Write that number here | ave an Interest In. | |
| 45. Add the dollar value of all of your entries from Part 5, including any e for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Half you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or com | ave an Interest In. | |
| 45. Add the dollar value of all of your entries from Part 5, including any e for Part 5. Write that number here | ave an Interest In. mercial fishing-related property? | |
| 45. Add the dollar value of all of your entries from Part 5, including any e for Part 5. Write that number here | ave an Interest In. mercial fishing-related property? | |
| 45. Add the dollar value of all of your entries from Part 5, including any e for Part 5. Write that number here | ave an Interest In. mercial fishing-related property? | |

Official Form 106A/B Schedule A/B: Property page 6

Page 16 of 46

Case number (if known) Document Debtor 1 **Richard James Wolff**

| Part | 8: List the Totals of Each Part of this Form | | | |
|------|--|------------|------------------------------|--------------|
| 55. | Part 1: Total real estate, line 2 | | | \$250,000.00 |
| 56. | Part 2: Total vehicles, line 5 | \$0.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$600.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$2,800.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$3,400.00 | Copy personal property total | \$3,400.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$253,400.00 |

Official Form 106A/B Schedule A/B: Property page 7

| | | | III FAUE 17 UL4U | |
|------------------------|--------------------------|-------------------|------------------------------|-----------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Richard James W | /olff | | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS EASTERN DIVISION | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|--|---|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Bed and a desk Line from Schedule A/B: 6.1 | \$100.00 | \$100.00 | 735 ILCS 5/12-1001(b) |
| Line Horr Schedule A/B. 3.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Clothing for 1 adult Line from Schedule A/B: 11.1 | \$200.00 | \$200.00 | 735 ILCS 5/12-1001(a) |
| Life from Schedule A/B. 11.1 | | 100% of fair market value, up to any applicable statutory limit | |
| Wedding ring Line from Schedule A/B: 12.1 | \$200.00 | \$200.00 | 735 ILCS 5/12-1001(b) |
| Line Holli Schedule A/B. 12.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| 10 year old bicycle Line from Schedule A/B: 14.1 | \$100.00 | \$100.00 | 735 ILCS 5/12-1001(b) |
| Line Holli Schedule A/B. 14.1 | | 100% of fair market value, up to any applicable statutory limit | |
| Checking: Chase Bank Line from Schedule A/B: 17.1 | \$800.00 | \$800.00 | 735 ILCS 5/12-1001(b) |
| Line from Scriedule A/B: 17.1 | | 100% of fair market value, up to any applicable statutory limit | |

Case 16-00875 Doc 1 Filed 01/12/16 Entered 01/12/16 13:41:44 Desc Main Document Page 18 of 46 Case number (if known) **Richard James Wolff** Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wolff Strength Corporation, d/b/a 735 ILCS 5/12-1001(b) \$2.000.00 \$2,000.00 MedFitness 100% of fair market value, up to 100 % ownership Line from Schedule A/B: 19.2 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

| | | Document | Page 19 | of 46 | | |
|--------------------------------------|-------------------------|---|----------------------|---|--------------------------|--------------------|
| Fill in this information | to identify you | case: | | | | |
| Debtor 1 Ric | chard James V | Volff | | | | |
| | Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) First | Name | Middle Name | Last Name | | - | |
| United States Bankrupt | cv Court for the: | NORTHERN DISTRICT OF IL | LINOIS FASTE | RN DIVISION | | |
| omea orates barmap. | o, court or unor | | | | - | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | ameno | led filing |
| Official Forms 40 | CD | | | | | |
| Official Form 10 | <u>6D</u> | | | | | |
| Schedule D: 0 | Creditors | Who Have Claims | Secured | by Propert | у | 12/15 |
| | | two married people are filing togeth | | | | |
| needed, copy the Addition (nown). | al Page, fill it out, i | number the entries, and attach it to | this form. On the | top of any additional p | ages, write your name a | nd case number (if |
| . Do any creditors have cl | laims secured by y | your property? | | | | |
| - | | | V | | 4 | |
| _ | | is form to the court with your other | er schedules. Yo | ou nave nothing else | to report on this form. | |
| Yes. Fill in all of | the information b | pelow. | | | | |
| Part 1: List All Secu | red Claims | | | | | |
| 2. List all secured claims. | If a creditor has mo | ore than one secured claim, list the cre | ditor separately for | Column A | Column B | Column C |
| each claim. If more than or | ne creditor has a pa | rticular claim, list the other creditors in | | Amount of claim | Value of collateral | Unsecured |
| as possible, list the claims i | in alphabetical orde | r according to the creditor's name. | | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 First Communi | ty Bank | Describe the property that secures | the claim: | \$311,675.00 | \$1,000,000.00 | \$0.00 |
| Creditor's Name | | 2090 Larkin Avenue Elgin, | IL 60123 | | | |
| | | Kane County | | | | |
| | | First Community Bank is a | | | | |
| | | Wolff Holdings, LLC. The Id | | | | |
| | | secured by a first mortgage | | | | |
| | | property. Debtor is a guara the loans: First Note & mor | | | | |
| | | Second Note & m | igage, | | | |
| 165 S. Randall | Pood | As of the date you file, the claim is: | Check all that | | | |
| Elgin, IL 60123 | | apply. | | | | |
| Number, Street, City, St | | ☐ Contingent ☐ Unliquidated | | | | |
| reamber, Street, Sity, St | ate a zip code | ☐ Disputed | | | | |
| Who owes the debt? Ch | neck one. | Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | | ☐ An agreement you made (such as | | red | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and Debtor 2 of | only | ☐ Statutory lien (such as tax lien, me | echanic's lien) | | | |
| ☐ At least one of the debte | - | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim rela | | Other (including a right to offset) | Second Not | te | | |
| community debt | | — Citio (including a right to choot) | | | | |
| Date debt was incurred | 2014 | Last 4 digits of account num | ber | | | |
| • | | | | | | |
| 2.2 First Communi | ty Bank | Describe the property that secures | the claim: | \$1,275,539.69 | \$1,000,000.00 | \$587,214.69 |
| Creditor's Name | | 2090 Larkin Avenue Elgin, | IL 60123 | | | |
| | | Kane County | | | | |
| | | First Community Bank is a | | | | |
| | | Wolff Holdings, LLC. The lo | | | | |
| | | secured by a first mortgage | | | | |
| | | property. Debtor is a guara the loans: First Note & mor | | | | |
| | | Second Note & m | -5490, | | | |
| 165 S. Randall | Road | As of the date you file, the claim is: | Check all that | | | |
| Elgin, IL 60123 | | apply. | | | | |
| Number, Street, City, St | | ☐ Contingent ☐ Unliquidated | | | | |
| rianiber, Street, Oity, St | ato a zip ooue | ☐ Disputed | | | | |
| | | - Disputed | | | | |

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| Peptor 1 Richard James Wolff | | | | Case number (if know) | | |
|------------------------------|---|--|-------------------------|---|--|--|
| | First Name | Middle Name | Last Name | | | |
| Who owe | s the debt? Check one | . Nature of lien | . Check all that apply. | y. | | |
| Debtor | 1 only | · · | nt you made (such as | as mortgage or secured | | |
| ☐ Debtor | 2 only | car loan) | | | | |
| □ Debtor | 1 and Debtor 2 only | ☐ Statutory lie | n (such as tax lien, me | nechanic's lien) | | |
| ☐ At least | one of the debtors and | another | en from a lawsuit | | | |
| | if this claim relates to a unity debt | Other (include | ding a right to offset) | First Note | | |
| Date debt | was incurred | Last 4 d | igits of account num | mber | | |
| If this is Write tha | the last page of your fo at number here: | ries in Column A on this p rm, add the dollar value to otified for a Debt That | otals from all pages. | \$1,587,214.69 | | |
| to collect fo | from you for a debt you | owe to someone else, lis you listed in Part 1, list the | t the creditor in Part | a debt that you already listed in Part 1. For example, if a collection agency is trying rt 1, and then list the collection agency here. Similarly, if you have more than one rs here. If you do not have additional persons to be notified for any debts in Part 1, | | |
| □ Na | me Address | | | | | |
| | ONE- | | (| On which line in Part 1 did you enter the creditor? | | |
| | | | | · | | |
| | | | L | Last 4 digits of account number | | |
| | | | | | | |

| | Case 10-00075 | | Document | Page 21 | ia 01/12/10 13.4. I nf 46 | L.44 DES | oc iviairi |
|-----------------|--|-------------------------|--|-----------------|----------------------------------|--------------------|--------------------------|
| Fill in this | s information to identify yo | | | | | | |
| Debtor 1 | Richard James | s Wolff | | | | | |
| Debior | First Name | Middle N | ame | Last Name | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, fil | ing) First Name | Middle N | ame | Last Name | | | |
| United Sta | ates Bankruptcy Court for th | e: NORTHERN | DISTRICT OF ILL | NOIS EAST | ERN DIVISION | | |
| Case num | nher | | | | | | |
| (if known) | | | _ | | | | Check if this is an |
| | | | | | | a | mended filing |
| Official | Form 100F/F | | | | | | |
| | Form 106E/F | VA/I 11 | | 01-: | | | 40/45 |
| | ule E/F: Creditors plete and accurate as possible. | | | | | | 12/15 |
| number (if k | ation Page to this page. If you known). List All of Your PRIORITY | | • | o not file that | rart. On the top of any ad | αιτιοnai pages, ν | vrite your name and case |
| 1. Do any | creditors have priority unsec | ured claims agains | t you? | | | | |
| ■ No. | Go to Part 2. | | | | | | |
| ☐ Yes | S. | | | | | | |
| Part 2: | List All of Your NONPRIO | RITY Unsecured | Claims | | | | |
| 3. Do any | creditors have nonpriority un | secured claims aga | ainst you? | | | | |
| □ No. | You have nothing to report in th | is part. Submit this fo | orm to the court with yo | ur other sched | ules. | | |
| ■ Yes | S. | | | | | | |
| claim, I | of your nonpriority unsecured ist the creditor separately for each rholds a particular claim, list the | ch claim. For each cl | aim listed, identify what | type of claim i | it is. Do not list claims alread | y included in Part | 1. If more than one |
| 4.1 C | hase | | Last 4 digits of accor | unt number | 5780 | | \$5,210.89 |
| No. | onpriority Creditor's Name | | | | | | |
| _ | ardmember Service OB 15153 | | When was the debt in | ncurred? | | | - |
| | /ilmington, DE 19886-51 | 153 | | | | | |
| | umber Street City State Zlp Code | | As of the date you fil | e, the claim is | : Check all that apply | | |
| W | ho incurred the debt? Check o | ne. | ☐ Contingent | | | | |
| | Debtor 1 only | | ☐ Unliquidated | | | | |
| | Debtor 2 only | | ☐ Disputed | | | | |
| | Debtor 1 and Debtor 2 only | | Type of NONPRIORIT | TY unsecured | claim: | | |
| | At least one of the debtors and | another | ☐ Student loans | | | | |
| | Check if this claim is for a co | ommunity debt | ☐ Obligations arising report as priority claim | | ation agreement or divorce the | nat you did not | |
| | No | | | | plans, and other similar deb | ıts | |
| | I Vas | | · | | general merchandis | | |

Best Case Bankruptcy

| 1 Richard James Wolff | Document Page 22 of 46 Case number (if know) | |
|--|---|------------|
| Meltzer, Purtill & Steele LLC | Last 4 digits of account number | \$0.0 |
| Nonpriority Creditor's Name 300 S. Wacker Drive Suite 2300 | When was the debt incurred? | · |
| Chicago, IL 60606-6704 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another | Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| □Yes | Collection: Notice Only. First Community Bank vs Wolff, 15 L 503, 16th Judicial Circuit, Kane County. | |
| Presence St. Joseph Hospital | Last 4 digits of account number 2809 | \$710.0 |
| Nonpriority Creditor's Name 32816 Collection Center Drive Chicago, IL 60693-0328 | When was the debt incurred? 2015 | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | |
| Debtor 1 only | ☐ Unliquidated | |
| ☐ Debtor 2 only | ☐ Disputed | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Medical services | |
| US Bank | Last 4 digits of account number 2528 | \$12,310.1 |
| Nonpriority Creditor's Name P.O. Box 790408 Saint Louis, MO 63179-0408 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | |
| Debtor 1 only | □ Unliquidated | |
| ☐ Debtor 2 only | ☐ Disputed | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit card: general merchandise | |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address -NONE-

On which entry in Part 1 or Part 2 did you list the original creditor?

Line of (Check one):

Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Richard James Wolff

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total cl | aim |
|-----------------------------|-----|---|-----|--------------------|-----------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| nom rait i | | • | | Ψ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total Claim | |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 18,231.06 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$ | 18,231.06 |

| | | | 111 FAUE 74 UL4U | |
|---------------------|--------------------------|-------------------|-----------------------------|----|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Richard James W | /olff | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS EASTERN DIVISIO | DN |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| 1 | Person or | company with | whom you have the , Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| | | | | | |

| | | Docume | nt Page 25 of | 46 | |
|----------------|--|---|-----------------------------|---|--|
| Fill in thi | s information to identify your | case: | | | |
| Debtor 1 | Richard James W | olff | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | ling) First Name | Middle Name | Lost Name | | |
| (Spouse if, fi | ling) First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS EASTERN | DIVISION | |
| Case nun | nber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Officia | al Form 106H | | | | |
| | | 1.4 | | | |
| Sche | dule H: Your Code | ebtors | | | 12/15 |
| fill it out, a | and number the entries in the e and case number (if known) | boxes on the left. Attach . Answer every question. | the Additional Page to | this page. On the top | eeded, copy the Additional Page, of any Additional Pages, write |
| 1. Do | you have any codebtors? (If y | ou are filing a joint case, o | do not list either spouse a | as a codebtor. | |
| □ No ■ Ye | | | | | |
| Arizo | thin the last 8 years, have you na, California, Idaho, Louisiana, o. Go to line 3. | Nevada, New Mexico, Pu | erto Rico, Texas, Washin | | states and territories include |
| in lin Form | e 2 again as a codebtor only i n 106D), Schedule E/F (Official ut Column 2. | f that person is a guaran | tor or cosigner. Make s | ure you have listed the 6G). Use Schedule D, S | with you. List the person shown e creditor on Schedule D (Officia Schedule E/F, or Schedule G to |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZII | P Code | | Check all schedules | litor to whom you owe the debt that apply: |
| | | | | | , , , |
| 3.1 | George M. Wolff | | | ☐ Schedule D, line | Δ |
| 0.1 | 20 S. Weston Avenue | | | ☐ Schedule E/F, I | |
| | Elgin, IL 60123 | | | ☐ Schedule G | |
| | Debtor's father, also owns | s 25% of Wolff Holding | js, LLC. | First Community | Bank |
| 3.2 | Michael T. Wolff | | | □ Cohodulo D. lin | |
| 0.2 | 2203 Brookwood Drive | | | ☐ Schedule D, line ☐ Schedule E/F, I | |
| | South Elgin, IL 60177 | | | ☐ Schedule G | |
| | Debtor's brother, also own | ns % of Wolff Holding | s, LLC. | First Community | Bank |
| | | | | | |

Schedule H: Your Codebtors

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| === | to the defendance of the state of the | | | | | | | | | |
|----------------------|--|---|---|-------------------------------------|----------------|--|-----------------------|--|-------------------|--|
| | in this information to identify your | | | | | | | | | |
| Del | otor 1 Richard Ja | mes Wolff | | | - | | | | | |
| | otor 2 ouse, if filing) | | | | | | | | | |
| Uni | ted States Bankruptcy Court for th | ne: NORTHERN DISTRIC | CT OF ILLINOIS EAS | STERN | _ | | | | | |
| (If kr | se number | | - | | | | ed filing ent shov | ving postpetition e following date: | | |
| <u>O</u> | fficial Form 106I | | | | | MM / DD/ Y | YYY | | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 | |
| sup spo atta | as complete and accurate as populating correct information. If you use. If you are separated and you have a separate sheet to this form Describe Employment | u are married and not fili our spouse is not filing w . On the top of any addit | ing jointly, and your rith you, do not inclu | [·] spouse i ude inforr | s liv natio | ing with you, inc | lude inf ouse. If | ormation abou more space is | t your needed, | |
| 1. | Fill in your employment information. | | Debtor 1 | | | | | n-filing spouse | | |
| | If you have more than one job, | Employment status | ■ Employed | | | ■ Emple | oyed | | | |
| | attach a separate page with information about additional employers. | | ☐ Not employed | ☐ Not employed | | | | b | | |
| | Include part-time, seasonal, or | Occupation | Personal Traine | er | | Genera | l Mana | iger | | |
| | self-employed work. | Employer's name | Med Fitness | | | Med Fitness | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 2400 East Main Saint Charles, I | | | 2400 East Main Street Saint Charles, IL 60174 | | | | |
| | | How long employed t | here? 6 years | 3 | | 6 | years | | | |
| Par | t 2: Give Details About Mo | onthly Income | | | | | | | | |
| E sti spol | mate monthly income as of the use unless you are separated. | date you file this form. If | you have nothing to | report for | any | line, write \$0 in the | e space. | . Include your no | on-filing | |
| | ou or your non-filing spouse have n e space, attach a separate sheet t | | ombine the information | on for all e | emplo | oyers for that pers | on on th | ne lines below. If | you need | |
| | | | | | | For Debtor 1 | | Debtor 2 or filing spouse | | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly | | | 2. | \$ | 4,000.00 | \$ | 3,740.00 | | |
| 3. | Estimate and list monthly ove | rtime pay. | | 3. | +\$ | 0.00 | +\$_ | 0.00 | | |
| 4. | Calculate gross Income. Add | line 2 + line 3. | | 4. | \$ | 4,000.00 | \$_ | 3,740.00 | | |

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| Debi | or 1 | Richard James Wolff | _ | C | ase n | umber (<i>if kr</i> | own) | | | | |
|------|----------------|--|-----------------|----|----------|----------------------|-------------|----------|------------|--------------|--|
| | | | | | For I | Debtor 1 | | | or Debtor | | |
| | Copy | y line 4 here | 4. | | \$ | 4,000 | .00 | \$ | n-filing s | ,740.00 | _ |
| | оор. | y line 4 nere | | | - | 4,000 | | Ψ. | | ,,,,,,,,, | <u></u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ | 967 | '.50 | \$ | | 962.00 |) |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | \$ | C | .00 | \$ | | 0.00 |) |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ | | .00 | \$ | | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$ | | .00 | \$_ | | 0.00 | _ |
| | 5e. | Insurance | 5e. | | \$ | | 0.00 | \$_ | | 0.00 | _ |
| | 5f. | Domestic support obligations Union dues | 5f. | | \$ | | 0.00 | \$ \$ | | 0.00 | |
| | 5g. 5h. | Other deductions. Specify: | 5g. 5h. | | φ \$ | | 0.00 | | | 0.00 | |
| _ | - | · · · · · · · · · · · · · · · · · · · | | | · — | | | - | | | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | ; | ₿ | | .50 | \$ | | 962.00 | |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | ; | \$ | 3,032 | 2.50 | \$_ | 2 | ,778.00 | <u>) </u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | | monthly net income. | 8a | | \$ | | 0.00 | \$_ | | 0.00 | |
| | 8b. | Interest and dividends | 8b. | | \$ | | 0.00 | \$ | | 0.00 | <u>) </u> |
| | 8c. | Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | π 8c. | | \$ | C | 0.00 | \$ | | 0.00 |) |
| | 8d. | Unemployment compensation | 8d. | | \$ | C | .00 | \$ | | 0.00 |) |
| | 8e. | Social Security | 8e. | | \$ | | .00 | \$ | | 0.00 |) |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 8g. | Pension or retirement income | 8g | | \$ \$ | | 0.00 | \$ | | 0.00 | _ |
| | 8h. | Other monthly income. Specify: | 8h | .+ | Φ | | 0.00 | + \$ | | 0.00 | <u>,</u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | C | .00 | \$_ | | 0.0 | 00 |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$ | 3 | ,032.50 | + \$ | 2 | ,778.00 | = \$ | 5,810.50 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ť | | ,002.00 | * | | , | | 0,010.00 |
| 11. | State Inclu | e all other regular contributions to the expenses that you list in Schedular contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are no | ur depe | | , | • | | • | n Schedu | le J. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certes | | | | | | | | \$Comb | 5,810.50 |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | n? | | | | | | | | lly income |
| | _ | No. Yes Explain: | | | | | | | | | |

| Fill | in this information to identify you | ur case: | | | | |
|------------|--|---|---|---------------|-------------------|-------------------------------|
| Deb | tor 1 Richard Jame | es Wolff | | Che | ck if this is: | |
| | otor 2 | | | | An amended filing | wing postpetition chapter |
| | ed States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLING | OIS EASTERN | | MM / DD / YYYY | the following date. |
| | e number nown) | | | | | |
| O: | fficial Form 106J | | | | | |
| | chedule J: Your E | xpenses | | | | 12/15 |
| Be info | as complete and accurate as ormation. If more space is nee nber (if known). Answer every | possible. If two married people areded, attach another sheet to this question. | | | | or supplying correct |
| 1. | Is this a joint case? | ioid | | | | |
| | ■ No. Go to line 2. □ Yes. Does Debtor 2 live ir | ո a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must | t file Official Form 106J-2, <i>Expenses</i> | s for Separate House | ehold of De | btor 2. | |
| 2. | Do you have dependents? | □No | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | Wife | | 51 | ■ Yes |
| | | | | | | □ No □ Yes |
| | | | | | | □ No |
| | | | | | | ☐ Yes |
| | | | | | | □ No |
| • | | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other th yourself and your dependen | | | | | |
| Est exp | | g Monthly Expenses ur bankruptcy filing date unless y ankruptcy is filed. If this is a supp | | | | |
| the | lude expenses paid for with n value of such assistance and ficial Form 106I.) | on-cash government assistance it I have included it on <i>Schedule I:</i> Y | f you know Your Income | | Your exp | enses |
| 4. | The rental or home ownersh payments and any rent for the | nip expenses for your residence. In ground or lot. | nclude first mortgage | e 4. S | \$ | 1,000.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. \$ | \$ | 0.00 |
| | 4b. Property, homeowner's, | or renter's insurance | | 4b. 9 | · | 0.00 |
| | | pair, and upkeep expenses | | 4c. S | | 75.00 |
| 5. | | on or condominium dues nts for your residence, such as ho | me equity loans | 4d. 9 5. 9 | · | 0.00 0.00 |
| J. | Additional mortgage payille | rito for your regidence, such as NO | ino oquity Idalia | J. (| y . | V.UU |

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| ebtor 1 | Richard James Wolff | Case number (if known) | |
|----------|--|----------------------------------|--------------------------|
| . Utilit | ies: | | |
| 6a. | Electricity, heat, natural gas | 6a. \$ | 175.00 |
| 6b. | Water, sewer, garbage collection | 6b. \$ | 100.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 135.00 |
| 6d. | Other. Specify: | 6d. \$ | 0.00 |
| Food | l and housekeeping supplies | 7. \$ | 350.00 |
| Child | care and children's education costs | 8. \$ | 0.00 |
| Cloth | ning, laundry, and dry cleaning | 9. \$ | 60.00 |
| Pers | onal care products and services | 10. \$ | 115.00 |
| Medi | cal and dental expenses | 11. \$ | 250.00 |
| Tran | sportation. Include gas, maintenance, bus or train fare. | | |
| Do no | ot include car payments. | 12. \$ | 150.00 |
| Ente | rtainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 100.00 |
| Char | itable contributions and religious donations | 14. \$ | 70.00 |
| Insu | rance. | | |
| Do no | ot include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. | Life insurance | 15a. \$ | 0.00 |
| 15b. | Health insurance | 15b. \$ | 100.00 |
| 15c. | Vehicle insurance | 15c. \$ | 70.00 |
| 15d. | Other insurance. Specify: | 15d. \$ | 0.00 |
| . Taxe | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Spec | ify: | 16. \$ | 0.00 |
| | Ilment or lease payments: | • | |
| | Car payments for Vehicle 1 | 17a. \$ | 250.00 |
| | Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| | Other. Specify: | 17c. \$ | 0.00 |
| | Other. Specify: | 17d. \$ | 0.00 |
| | payments of alimony, maintenance, and support that you did not report | | 0.00 |
| | cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10 r payments you make to support others who do not live with you. | \$ | 0.00 |
| Spec | | φ | 0.00 |
| | r real property expenses not included in lines 4 or 5 of this form or on 5 | | |
| | Mortgages on other property | 20a. \$ | 0.00 |
| | Real estate taxes | 20b. \$ | 350.00 |
| | Property, homeowner's, or renter's insurance | 20c. \$ | 65.00 |
| | Maintenance, repair, and upkeep expenses | 20d. \$ | 1,500.00 |
| | Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| | | 21. +\$ | |
| . Otne | r: Specify: | 21. +\$ | 0.00 |
| . Calc | ulate your monthly expenses | | |
| 22a. | Add lines 4 through 21. | \$ | 4,915.00 |
| 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106. | J-2 \$ | |
| | Add line 22a and 22b. The result is your monthly expenses. | \$ | 4,915.00 |
| | | | 7,010.00 |
| | ulate your monthly net income. | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 5,810.50 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b\$ | 4,915.00 |
| 222 | Cubtract your monthly evacage from your monthly income | | |
| 23C. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. \$ | 895.50 |
| | The result is your monthly not moonie. | <u> </u> | |
| | ou expect an increase or decrease in your expenses within the year after | | |
| | cample, do you expect to finish paying for your car loan within the year or do you expect you | our mortgage payment to increase | or decrease because of a |
| _ | cation to the terms of your mortgage? | | |
| ■ N | | | |
| □ Ye | es. Explain here: | | |

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| Fill in this inform | ation to identify ye | our case: | | | | |
|---------------------------------|---|--------------------------|------------------|-------------------------|---------------|--|
| Debtor 1 | Richard James | | | | | |
| Debtor i | First Name | Middle Name | Las | st Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Las | st Name | | |
| United States Ban | kruptcy Court for th | e: NORTHERN DIST | RICT OF ILLINC | IS EASTERN DIVISIO | N | |
| Case number | | | | | | ☐ Check if this is an amended filing |
| Official Form | | an Individu | ial Dabti | or's Sabadı | ulaa | |
| Declarati | on About | an Individu | iai Debti | or s Schedi | lies | 12/15 |
| If two married peo | pple are filing toge | ther, both are equally r | esponsible for | supplying correct info | rmation. | |
| obtaining money | | d in connection with a | | | | tement, concealing property, or 000, or imprisonment for up to 20 |
| Sign | Below | | | | | |
| Did you pay | or agree to pay so | meone who is NOT an | attorney to help | you fill out bankrupt | cy forms? | |
| ■ No | | | | | | |
| ☐ Yes. Na | ame of person | | | | | nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) |
| | y of perjury, I decl true and correct. | are that I have read the | summary and | schedules filed with th | nis declarati | ion and |
| Richard | ard James Wolff James Wolff of Debtor 1 | | x | Signature of Debtor 2 | | |

Date

Date **January 12, 2016**

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| Fill | in this inforn | nation to identify you | r case: | | | |
|-------------------|---------------------------------------|--|--|--|--|---|
| Del | btor 1 | Richard James \ | | LastNama | | |
| Del | btor 2 | First Name | Middle Name | Last Name | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS EASTERN DIV | ISION | |
| Ca | se number | | | | | |
| (if kı | nown) | | | | | Check if this is an amended filing |
| ∩f | ificial Ear | rm 107 | | | | |
| | ficial For atement | | Affairs for Indivi | duals Filing for B | ankruptcy | 12/1 |
| info nun | ormation. If m | nore space is needed, n). Answer every ques | attach a separate sheet to | e are filing together, both are othis form. On the top of an | | |
| 1. | | r current marital statu | | ou Liveu Beiore | | |
| | ■ Married □ Not mar | | | | | |
| _ | | | Book and a second and a set on the se | | | |
| 2. | During the ia | ast 3 years, nave you | lived anywhere other than | i where you live now? | | |
| | □ No | | | | | |
| | Yes. Lis | t all of the places you l | ived in the last 3 years. Do | not include where you live no | W. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 'lived there | 1 Debtor 2 Prior Ad | ddress: | Dates Debtor 2 lived there |
| | 1408 E. Ma Apartment Saint Char | | From-To: 2005-2009 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: |
| 3. stat | es and territori | es include Arizona, Ca | | egal equivalent in a commu levada, New Mexico, Puerto F Official Form 106H). | | |
| Pai | rt 2 Explai | n the Sources of You | r Income | | | |
| 4. | Fill in the tota | al amount of income yo | u received from all jobs and | ing a business during this y d all businesses, including par ive together, list it only once u | t-time activities. | endar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | | | | | |

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Case number (if known) Debtor 1 Richard James Wolff

| | | | | | Debtor 1 | | | | | Debtor 2 | | | |
|-----|-------|------------|------------------------------|----------------------------|--------------------------------|---|---------|--|----------|-------------------------------------|--------------|---|--|
| | | | | | Sources of Check all to | | (be | oss income fore deductions clusions) | and | Sources of inc Check all that a | | Gross income (before deductions and exclusions) | |
| | | | / 1 of curre iled for bar | nt year until nkruptcy: | ■ Wages bonuses, t | s, commissions, tips | | \$2,000 | 0.00 | ☐ Wages, commissions, bonuses, tips | | | |
| | | | | | ■ Operat | ing a business | | | | ☐ Operating a | business | | |
| | | | dar year: December | 31, 2015) | ■ Wages bonuses, t | , commissions, tips | | \$48,000 | 0.00 | ☐ Wages, com bonuses, tips | missions, | | |
| | | | | | ■ Operat | ing a business | | | | ☐ Operating a | business | | |
| | | | dar year be December | | ■ Wages bonuses, t | , commissions, tips | | \$38,000 | 0.00 | ☐ Wages, com bonuses, tips | missions, | | |
| | | | | | ☐ Operati | ing a business | | | | ☐ Operating a | business | | |
| | | | | | ☐ Wages bonuses, t | s, commissions, tips | | \$13,136 | 6.00 | ☐ Wages, combonuses, tips | missions, | | |
| | | | | | ■ Operati | ing a business | | | | ☐ Operating a | business | | |
| | | No Yes. | Fill in the de | etails. | | | | | | | | | |
| | | | | | Debtor 1 | | | | | Debtor 2 | | | |
| | | | | | Sources of Describe b | | (be | oss income fore deductions clusions) | and | Sources of inc Describe below | | Gross income (before deductions and exclusions) | |
| Par | rt 3: | List | Certain Pa | yments You | Made Befo | re You Filed for | Bankr | ruptcy | | | | | |
| 6. | Are | either | Debtor 1's | or Debtor 2 | s debts pri | marily consume | r debt | s? | | | | | |
| - | | No. | Neither De | ebtor 1 nor D | ebtor 2 has | | umer o | debts. Consume | er debts | are defined in 11 | U.S.C. § 10 | 01(8) as "incurred by an | |
| | | | During the No. | 90 days befo | • | for bankruptcy, di | id you | pay any creditor | a total | of \$6,225* or mo | re? | | |
| | | | □ Yes | List below e | each creditor editor. Do no | | nts for | domestic suppo | | | | the total amount you and alimony. Also, do | |
| | | | * Subject | | . , | and every 3 year | | , , | led on | or after the date of | of adjustmen | ıt. | |
| | | Yes. | | | | e primarily consu for bankruptcy, di | | | a total | of \$600 or more? | ? | | |
| | | | □ No. | Go to line 7 | | | | | | | | | |
| | | | □ Yes | List below e include pay | each creditor ments for do | | | | | | | at creditor. Do not include payments to | |
| | Cre | editor' | s Name and | d Address | | Dates of payme | nt | Total amou | ınt | Amount you | Was this | payment for | |
| | | | | | | J. payo | | | aid | still owe | | ., | |

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| 7. | Within 1 year before you filed for bankrupto Insiders include your relatives; any general part corporations of which you are an officer, direct including one for a business you operate as a support and alimony. | rtners; relatives of any gen or, person in control, or ov | neral partners; partne wner of 20% or more | rships of which you of their voting sec | ou are a genera curities; and an | al partner; y managing agent, | |
|-----|---|---|---|--|-------------------------------------|----------------------------------|--|
| | ■ No□ Yes. List all payments to an insider | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi | | ments or transfer a | ny property on a | ccount of a de | ebt that benefited a | |
| | ■ No | | | | | | |
| | Yes. List all payments to an insider | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include credi | this payment itor's name | |
| Pa | rt 4: Identify Legal Actions, Repossession | s. and Foreclosures | | | | | |
| | | | | | _ | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. | | | | | | |
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case | |
| | First Community Bank vs Wolff 15 L 503 | Collection/Foreclo sure Circuit Court, Kane Cou 540 South Randall Road Geneva, IL 60134 | | | | | |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below | | erty repossessed, fo | oreclosed, garnis | shed, attached | d, seized, or levied? | |
| | ■ No□ Yes. Fill in the information below. | | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | |
| | | Explain what happened | 1 | | | propert | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca | | luding a bank or fin | ancial institution | n, set off any a | amounts from your | |
| | Yes. Fill in the details. | - | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taken | action was | Amoun | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an | | erty in the possessi | on of an assigne | e for the bene | efit of creditors, a | |
| | Yes | | | | | | |

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| Pa | t 5: List Certain Gifts and Contributions | | | |
|-----|---|---|---|---------------------------|
| 13. | Within 2 years before you filed for bankrupto No Yes. Fill in the details for each gift. | cy, did you give any gifts with a total value of more | than \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankrupto No Yes. Fill in the details for each gift or contri | cy, did you give any gifts or contributions with a to | tal value of more than | \$600 to any charity |
| | Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
| Pai | t 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankruptcy disaster, or gambling? No Yes. Fill in the details. | y or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other |
| | Describe the property you lost and how the loss occurred Inc | scribe any insurance coverage for the loss lude the amount that insurance has paid. List nding insurance claims on line 33 of Schedule A/B: operty. | Date of your loss | Value of property lost |
| Pai | t 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or prep | y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require | | rty to anyone you |
| | □ No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Safanda Law Firm 111 East Side Drive Geneva, IL 60134-2402 Plegal@xnet.com | Attorney Fees | 1/6/2015 | \$1,500.00 |
| 17. | Within 1 year before you filed for bankruptcy promised to help you deal with your credito Do not include any payment or transfer that you | | or transfer any prope | rty to anyone who |
| | No No | | | |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was | Amount of payment |

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Debtor 1 **Richard James Wolff**

| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | |
|-----|--|---|----------------------------|-------------|---|----------|---|--|
| | Person Who Received Transfer Address | Description and various property transferred | | payme | ibe any property or ents received or debts n exchange | Date | e transfer was le | |
| | Person's relationship to you | | | para n | roxonango | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Name of trust | Description and va | alue of the pro | perty trans | sferred | Date | e Transfer was | |
| Par | rt 8: List of Certain Financial Accounts, Ins | truments Safe Denosit | Boyes and St | torage Unit | ·e | mac | | |
| | <u> </u> | • | • | • | | | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? | , were any financial acc | counts or instr | ruments he | eld in your name, or for | your be | enefit, closed, | |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | |
| | No | | | | | | | |
| | Yes. Fill in the details. | | | | 5 . | | | |
| | | Last 4 digits of account number | Type of account instrument | unt or | Date account was closed, sold, moved, or transferred | bet | Last balance fore closing or transfer | |
| 21. | Do you now have, or did you have within 1 yeash, or other valuables? | ear before you filed for | bankruptcy, a | ny safe dep | oosit box or other depo | sitory f | for securities, | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acce Address (Number, St | | Describe | the contents | | o you still ave it? | |
| | | State and ZIP Code) | | | | | | |
| 22. | Have you stored property in a storage unit o | r place other than your | home within 1 | year befor | re you filed for bankrup | tcy | | |
| | No Yes. Fill in the details. | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | Describe | the contents | | o you still ave it? | |
| | | | | | | | | |
| Par | t 9: Identify Property You Hold or Control f | or Someone Else | | | | | | |
| 23. | Do you hold or control any property that son for someone. | neone else owns? Inclu | ıde any proper | ty you bori | rowed from, are storing | for, or | hold in trust | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, St Code) | | Describe | the property | | Value | |
| Par | rt 10: Give Details About Environmental Info | • | | | | | | |

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 **Richard James Wolff**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

| Rep | ort all notices, releases, and proceedings th | at you know about, regardless of when | they occurred. | | | | |
|-----|--|--|---|--------------------|--|--|--|
| 24. | . Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of | any release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you been a party in any judicial or adr | ninistrative proceeding under any envir | onmental law? Include settlements | and orders. | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | |
| Par | t 11: Give Details About Your Business or | · · | | | | | |
| 27. | Within 4 years before you filed for bankrup | tcy, did you own a business or have any | of the following connections to any | / business? | | | |
| | ☐ A sole proprietor or self-employed i | n a trade, profession, or other activity, e | either full-time or part-time | | | | |
| | ■ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | |
| | ☐ A partner in a partnership | | | | | | |
| | ■ An officer, director, or managing executive of a corporation | | | | | | |
| | ■ An owner of at least 5% of the votin | g or equity securities of a corporation | | | | | |
| | ☐ No. None of the above applies. Go to | Part 12. | | | | | |
| | Yes. Check all that apply above and fill | I in the details below for each business. | | | | | |
| | Business Name Address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. | | | | |
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Dates business existed | | | | |
| | Wolff Holdings, LLC 2090 Larkin Avenue | Real estate investment | EIN: 36-4137044 | | | | |
| | Elgin, IL 60123 | Sassetti Public Accounting 6611 West North Avenue Oak Park, IL 60301 | From-To 1997 - present | | | | |

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| | Business Name Address | Describe the nature of the business | | r Identification number clude Social Security number or ITIN. |
|-----------------------|---|--|--------------|--|
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Dates bus | siness existed |
| | Wolff Strength Corporation 2400 E. Main Street | Medical (d/b/a MedFitness) | EIN: | 36-4373123 |
| | Suite 105 Saint Charles, IL 60174 | James J. Burress, CPA 167 N. Spring Street Elgin, IL 60120 | From-To | 2008 - present |
| 28. | Within 2 years before you filed for bankrup institutions, creditors, or other parties. □ No | tcy, did you give a financial statement to a | anyone abou | ut your business? Include all financial |
| | NoYes. Fill in the details below. | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |
| | First Community Bank 165 S. Randall Road Elgin, IL 60123 | 7/2014 | | |
| Par | t 12: Sign Below | | | |
| are t with 18 U | ve read the answers on this Statement of Fi true and correct. I understand that making a a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571. | a false statement, concealing property, or | obtaining m | oney or property by fraud in connection |
| Ric | hard James Wolff nature of Debtor 1 | Signature of Debtor 2 | | |
| Dat | e _January 12, 2016 | Date | | |
| Did : ■ N □ Y | • | ent of Financial Affairs for Individuals Fili | ng for Bankı | ruptcy (Official Form 107)? |
| Did : | you pay or agree to pay someone who is no | ot an attorney to help you fill out bankrupto | cy forms? | |

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor | mation to identify your o | ase. | | |
|-----------------------------------|---|--------------------|--|---|
| Debtor 1 | Richard James W | | | |
| DCDIOI 1 | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS EASTERN DIVISION | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | amended ming |
| Official Fo | rm 108 | | | |
| | | n for Indiv | viduals Filing Under Chapt | er 7 12/15 |
| <u> </u> | THE OF INTESTICION | Troi man | | 1213 |
| | ividual filing under chap | | ill out this form if: | |
| _ | e claims secured by you | | and asserting d | |
| You must file thi | ever is earlier, unless the | ithin 30 days afte | not expired. Tyou file your bankruptcy petition or by the date so The time for cause. You must also send copies to the | |
| If two married po | | in a joint case, b | oth are equally responsible for supplying correct | information. Both debtors must |
| Be as complete | and accurate as possibl | e. If more space i | s needed, attach a separate sheet to this form. Or | n the top of any additional pages, |
| | our name and case num | | • | , |
| Part 1: List Y | our Creditors Who Have | Secured Claims | | |
| 1. For any credit | ors that you listed in Pa | rt 1 of Schedule I | D: Creditors Who Have Claims Secured by Proper | ty (Official Form 106D), fill in the |
| information be Identify the cr | elow. editor and the property th | at is collateral | What do you intend to do with the property that secures a debt? | t Did you claim the property as exempt on Schedule C? |
| | | | Scource a dest. | as exempt on concaute of |
| Creditor's F | irst Community Bank | | ■ Surrender the property. | ■ No |
| name: | , | | Retain the property and redeem it. | — NO |
| Description of | 2090 Larkin Avenue | a Elgin II | ☐ Retain the property and enter into a | ☐ Yes |
| property | 60123 Kane Count | | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | First Community B | ank is a | = rotain the property and [explain]. | |
| | lender to Wolff Hol The loans are secu | | | |
| | mortgage on this p | roperty. | | |
| | Debtor is a guarant | | | |
| | Ioans: First Note & Second Note & m | mortgage, | | |
| | | | | |
| Creditor's F | irst Community Bank | | ■ Surrender the property. | ■ No |
| name: | | | Retain the property and redeem it. | ☐ Yes |
| Description of | 2090 Larkin Avenue | e Elgin, IL | ☐ Retain the property and enter into a Reaffirmation Agreement. | □ 169 |
| | 60123 Kane Count | y | ŭ | |
| | First Community Balender to Wolff Hole | | | |
| | The loans are secu | | | |
| | mortgage on this p | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Ri | chard James Wolff | Case number (if known) |
|---------------------------------|--|---|
| property securing de | Debtor is a guarantor of the loans: First Note & mortgage, Second Note & m | ☐ Retain the property and [explain]: |
| Dort 2: List | Vous Unevnired Personal Preparty Leas | ^^ |
| For any unexpin the informa | tion below. Do not list real estate leases. | ted in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fi Unexpired leases are leases that are still in effect; the lease period has not yet ended if the trustee does not assume it. 11 U.S.C. § 365(p)(2). |
| Describe you | r unexpired personal property leases | Will the lease be assumed? |
| Lessor's name | | □ No |
| Property: | | ☐ Yes |
| Lessor's name Description of | | □ No |
| Property: | loudou | ☐ Yes |
| Lessor's name | | □ No |
| Description of Property: | leased | ☐ Yes |
| Lessor's name | | □ No |
| Description of Property: | leased | ☐ Yes |
| Lessor's name | | □ No |
| Description of Property: | leased | ☐ Yes |
| Lessor's name | | □ No |
| Description of Property: | leased | ☐ Yes |
| Lessor's name | | □ No |
| Description of Property: | leased | ☐ Yes |
| Part 3: Sign | n Below | |
| Under penalty | | my intention about any property of my estate that secures a debt and any personal |
| X /s/ Rich | ard James Wolff | X |
| Richard | I James Wolff e of Debtor 1 | Signature of Debtor 2 |
| Date | January 12, 2016 | Date |
| | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-00875 Doc 1 Filed 01/12/16 Entered 01/12/16 13:41:44 Desc Main Document Page 44 of 46

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois Eastern Division

| In | re Richard James Wolff | | | Case No. | | |
|------|--|---|--|--|------------------------------------|--------------|
| | | | Debtor(s) | Chapter | 7 | |
| | DISCLOS | SURE OF COMPE | NSATION OF ATTOR | NEY FOR DI | EBTOR(S) | |
| 1. | compensation paid to me with | hin one year before the filin | 6(b), I certify that I am the attorned ng of the petition in bankruptcy, of or in connection with the bank | or agreed to be paid | to me, for services re | |
| | For legal services, I have | e agreed to accept | | \$ | 1,500.00 | |
| | Prior to the filing of this | statement I have received | | \$ | 1,500.00 | |
| | | | | | 0.00 | |
| 2. | The source of the compensation | on paid to me was: | | | | |
| | ■ Debtor □ O | Other (specify): | | | | |
| 3. | The source of compensation to | to be paid to me is: | | | | |
| | ■ Debtor □ O | Other (specify): | | | | |
| 4. | ■ I have not agreed to share | e the above-disclosed comp | pensation with any other person u | ınless they are mem | bers and associates of | my law firm. |
| | | | sation with a person or persons who when the people sharing in the contract of the people sharing in the peo | | | aw firm. A |
| 5. | In return for the above-disclo | osed fee, I have agreed to r | ender legal service for all aspects | of the bankruptcy | ease, including: | |
| | b. Preparation and filing of a c. Representation of the debt d. [Other provisions as neede Negotiations with reaffirmation agree | any petition, schedules, sta tor at the meeting of credit ed] n secured creditors to | ering advice to the debtor in determinent of affairs and plan which it tors and confirmation hearing, and reduce to market value; exercises as needed; preparation to busehold goods. | may be required; d any adjourned hea mption planning | rings thereof; ; preparation and f | iling of |
| 6. | By agreement with the debtor | c(s), the above-disclosed fe | tee does not include the following ischargeability actions, judic | | es, relief from stay | / actions or |
| | | | CERTIFICATION | | | |
| this | I certify that the foregoing is a sankruptcy proceeding. | a complete statement of an | ny agreement or arrangement for p | payment to me for re | epresentation of the de | ebtor(s) in |
| _ | January 12, 2016 | | /s/ Carl F. Safanda | 1 | | |
| | Date | | Carl F. Safanda 24 Signature of Attorney | | | |
| | | | Safanda Law Firm | | | |
| | | | 111 East Side Driv Geneva, IL 60134- | - | | |
| | | | (630) 262-1761 Fa | | 4 | |
| | | | Plegal@xnet.com Name of law firm | | | |
| | | | | | | |

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United States Bankruptcy Court Northern District of Illinois Eastern Division

| In re | Richard James Wolff | | Case No. | |
|-------|--|---|--------------------------------------|-------|
| | | Debtor(s) | Chapter 7 | |
| | VE | CRIFICATION OF CREDITOR M | MATRIX | |
| | | Number of | f Creditors: | 7 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credit | tors is true and correct to the best | of my |
| Date: | January 12, 2016 | /s/ Richard James Wolff Richard James Wolff | | _ |

Chase Cardmember Service POB 15153 Wilmington, DE 19886-5153

First Community Bank 165 S. Randall Road Elgin, IL 60123

George M. Wolff 20 S. Weston Avenue Elgin, IL 60123

Meltzer, Purtill & Steele LLC 300 S. Wacker Drive Suite 2300 Chicago, IL 60606-6704

Michael T. Wolff 2203 Brookwood Drive South Elgin, IL 60177

Presence St. Joseph Hospital 32816 Collection Center Drive Chicago, IL 60693-0328

US Bank P.O. Box 790408 Saint Louis, MO 63179-0408